

## (To be completed after Smallpox Surveillance Form 5A)

Smallpox Case Report ID#: \_\_\_\_\_ Date of report: \_\_\_\_\_

**Case Information** (Note: these data will be entered onto form from computer programs)

Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_ SS# \_\_\_\_\_  
 Date of Birth : MM /DD / YYYY. Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Race/ethnicity: \_\_\_\_\_  
 Home telephone number : ( ) \_\_\_\_\_ - \_\_\_\_\_ Contact name/relationship: \_\_\_\_\_  
 Telephone number: ( ) \_\_\_\_\_ - \_\_\_\_\_  
 Home address: (street address) \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Information provided by: Case \_\_\_\_\_ Household member \_\_\_\_\_ Other/relationship \_\_\_\_\_

**Clinical Information and Outcome**

Maximum fever: \_\_\_\_\_ Date of maximum fever: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of last fever: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Date that last scab fell off: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Type of Smallpox\*: Rash (most severe stage): Ordinary types: Discrete lesions \_\_\_\_\_ Semi-confluent – face only \_\_\_\_\_  
 Confluent –face and other site \_\_\_\_\_ Flat type \_\_\_\_\_ Hemorrhagic type \_\_\_\_\_ Modified \_\_\_\_\_  
 Admission to hospital: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ If yes, date of admission: \_\_\_\_/\_\_\_\_/\_\_\_\_ Medical record # \_\_\_\_\_  
 Hospital name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Transfer to 2<sup>nd</sup> hospital: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ If yes, date of admission: \_\_\_\_/\_\_\_\_/\_\_\_\_ Medical record # \_\_\_\_\_  
 Hospital name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Admitted to other isolation facility: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ If yes, date of admission: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Facility name: \_\_\_\_\_ Address: \_\_\_\_\_ Phone: ( ) \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Admitted to intensive care: Yes \_\_\_\_\_ No \_\_\_\_\_ Numbers of days in ICU \_\_\_\_\_  
 Complications (check all that apply): Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Skin secondary bacterial infection: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Ocular corneal ulcer or keratitis: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 CNS encephalitis: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Respiratory: Bronchitis: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ Pneumonia: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Joint/bones: Arthralgia: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ Oseitis: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Hemorrhagic: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Other, specify \_\_\_\_\_  
 Smallpox specific therapy (check all that apply): Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Antiviral medication: Cidofovir: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Other (list): \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ Date administered: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Outcome: Survived \_\_\_\_\_ Date of hospital discharge: \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Complications at discharge: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_ If yes, specify \_\_\_\_\_  
 Died \_\_\_\_\_ Date of death: \_\_\_\_/\_\_\_\_/\_\_\_\_ Autopsy performed: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Location of autopsy: \_\_\_\_\_  
 Smallpox vaccination history  
 Was the case vaccinated since completion of Form 5A? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  
 Date of vaccination: \_\_\_\_\_ Vaccine “take” recorded at 7 days? Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_

**Laboratory Information**

Lab testing for smallpox: Yes \_\_\_\_\_ No \_\_\_\_\_ Unknown \_\_\_\_\_  

	Date specimen taken	Result	Type of specimen*(skin lesion, CSF, other..specify)
PCR:	____/____/____	Positive _____ Negative _____	Indeterminate _____
Culture:	____/____/____	Positive _____ Negative _____	Indeterminate _____
Electronic microscopy:	____/____/____	Positive _____ Negative _____	Indeterminate _____
IgM:	____/____/____	Positive _____ Negative _____	Indeterminate _____
IgG Acute:	____/____/____	Positive _____ Negative _____	Indeterminate _____
IgG Convalescent:	____/____/____	Positive _____ Negative _____	Indeterminate _____

**Epidemiological Information**

(Update if more information available since completion of Smallpox Surveillance Form 5A)

Epi-linked to a confirmed or probable case: Yes\_\_\_ No\_\_\_ Unknown\_\_\_

Location of exposure: Home\_\_\_ Work\_\_\_ School (not college)\_\_\_ College\_\_\_ Military\_\_\_ Hospital\_\_\_  
 Doctor's office/clinic\_\_\_ Other, specify\_\_\_\_\_

Final case status: Confirmed\_\_\_ Probable\_\_\_ Suspect\_\_\_

Not smallpox, specify correct diagnosis\_\_\_\_\_

**Smallpox Case Definition and Classification**

**Clinical Case Definition:** An illness with acute onset of fever >101 F followed by a rash characterized by vesicles or firm pustules in the same stage of development without other apparent cause.

**Laboratory Criteria for Diagnosis\*** (to be conducted in Level C or D laboratories only)

1. Isolation of smallpox (Variola) virus from a clinical specimen, (Level D laboratory only), or
2. Polymerase chain reaction (PCR) identification of variola DNA in a clinical specimen, or
3. Negative stain Electron microscopy (EM) identification of Variola virus in a clinical specimen (Level D laboratory or approved Level C laboratory)

\*Level D laboratories include the CDC and USAMRIID. Initial confirmation of a smallpox outbreak requires testing in a Level D laboratory. Level C laboratories will assist with testing of clinical specimens following initial confirmation of an outbreak by CDC.

**Case Classification**

*Confirmed case* = A case that meets the above case definition and is laboratory confirmed

*Probable case* = A case that meets the clinical case definition that is not laboratory confirmed but has an epidemiological link to another confirmed or probable case.

*Suspect case* = A case that meets the clinical case definition but is not laboratory confirmed and does not have an epidemiological link to a confirmed or probable case of smallpox, OR a case that has an atypical presentation that is not laboratory confirmed but has an epidemiological link to a confirmed or probable case of smallpox. Atypical presentations of smallpox include a) hemorrhagic and b) flat, velvety lesions not appearing as typical vesicles nor progressing pustules.

**\*Smallpox Clinical Types**

Ordinary type:	Raised, pustular lesions with 3 sub-types:
Confluent	Confluent rash on face and forearms
Semi-confluent	Confluent rash on face, discrete elsewhere
Discrete	Areas of normal skin between pustules, even on skin
Modified type	Like ordinary type but with an accelerated course
Flat type	Pustules remain flat; usually confluent or semi-confluent, usually fatal
Hemorrhagic type:	Widespread hemorrhages in skin and mucous membranes
Early	With purpuric rash, always fatal
Late	With hemorrhage into base pustules, usually fatal